



CHANGE OF CORRESPONDENCE ADDRESS Application Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/685,200
	Filing Date	10/10/2000
	First Named Inventor	McCORKLE
	Art Unit	2631
	Examiner Name	
	Attorney Docket Number	XSI.004/10X-212

Please change the Correspondence Address for the above-identified application to:				
<input checked="" type="checkbox"/>	Customer Number	23400	RECEIVED	
OR			MAR 3 1 2004	
<input type="checkbox"/>	Firm or Individual Name	Technology Center 2600		
Address				
Address				
City		State		ZIP
Country				
Telephone		Fax		
<p>This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).</p> <p>I am the :</p> <p><input type="checkbox"/> Applicant/Inventor.</p> <p><input type="checkbox"/> Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> Attorney or Agent of record.</p> <p><input type="checkbox"/> Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____</p>				
Typed or Printed Name		Brian C. Altmiller (Reg. No. 37,271)		
Signature				
Date		March 25, 2004		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				

*Total of _____ forms are submitted.
